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Application Number	09/995,525	
Filing Oate	11/28/2001	
first Named Inventor	Vaders	
Group Art Unit	1777	
Examiner Name.		
Attorney Docket Number	11:624.0.290	

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City	Bethesda.			<u> </u>	
Country	US	State	MD	ZIP 20817	·············
Telephone	301-896-0600	Fax	301-89		
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I am the:				•	
Applicant/invent	or.			•	
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Assignee of red	ord of the entire interest. See 37	7 CFR 3.71.	. •		
Statement unde	r 37 CFR 3.73(b) is enclosed. (F	orm PT0158196)	ł,		
	SIGNATURE of Application		4		<u></u>
!	SIGNATURE of Applicant of	IF ASSIGNEE OF RE	sara		
Name De:	nnis H. Vaders			* * .	
Signature	Penni Hearts				
Date	12/16/02		•		
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PTC/S8/81 (02.01)
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/995,525
Filing Qate	11/28/2001
First Named Inventor	Vaders
Title	METHOD OF MANUFACTUR
Group Art Unit	1772
Examiner Name	
Attorney Docket Number	16240,290

Practitioners at Customer Number OR Practitioner(s) named below: Thomas P. Liniak Joseph W. Berenato, Itt. 33,415 Joseph W. Berenato, Itt. 30,344 Jeffrey I. Aucrhach 31,610 John M. White 31,634 Matthew W. Stavish 36,336 Matthew W. Stavish 36,336 Matthew P. Johnston 41,096 as my/dur attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number. OR Practitioners at Customer Number. OR Practitioners at Customer Number. OR Individual Name Joseph W. Berenato, III Address Customer Number Liniak, Berenato 8 White, Liniak Address Cost Spring Drive, Suite 240 City Bethesda State Maryland Zo 20817 Country US Teleghone 301–896–0600 Fax 301–896–0607 I am the: XX Applicant/Inventor. Assignee of record of the entire interest, See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form Procsars). Signature Dennis H. Vaders Signature Dennis H. Vaders Signature Of the entire interest of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	l ruesedy ab	point	•		
Practitioner(s) named below: Thomas? Liniak J1,415 Jaseph W. Berenato, Itt J0,546 James R. Longater J1,631 James R. Longater John M. White J1,634 John M. White J1,634 Matthew W. Stavish J6,284 Matthew W. Stavish J6,284 Milliam C. Schrot J1,730 Matthew W. Stavish Matthew P. Johnson J1,730 Matthew P. Johnson J1,834 Milliam C. Schrot J3,625 Matthew P. Johnson J1,834 Milliam C. Schrot J8,447 Milliam C. Schrot J8		tioners at Customer Num	ner	Number Bar Code	
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